CAMPAIGN CONTRIBUTIONS AND	EXPENSES	REPORT	State	of Nevada
VANIEL D. CARNE DIS		STEE		A
3170 SLEEPY HOLLIW DR, R	e (if applicable)	87502	Dis	trict (if applicable)
Mailing Address (include city and zip code) RENOCAENE E ACL. COM	/		Telephone No.	7 3770
E-Mail Address				
Select Appropriate Box(es) CANDIDATE PAC	BAG POL PRTY	☐IND EXP ☐	AMENDED ANI	NUAL FILING
Annual Filing - Due January 15,	2004	direction of the second seal house of the Second		
Period: January 1, 2003 – December 31, 2003	2004 .			
<i>.</i>				
Report #1 — Due August 31, 2004 Incumbents in an Office with a 4-year term Period: Jan	. 5, 2001 — Aug 26, 20	nna		
Incumbents in an Office with a 6-year term Period: Dec	5. 20, 1998 — Aug 26, . 1, 2004 – Aug. 26, 20	2004		
	c. 5, 2002 – Aug 26, 20	004		3.
Report #2 Due — October 26, 2004 Period: Aug	g. 27, 2004 — Oct. 21,	2004	FOR OFF	ICE USE ONLY
Report #3 Due — January 15, 2005*				
	. 22, 2004 — Dec. 31, . 22, 2004 - Dec. 5, 20			
Annual Filing - Due January 15, 200	·			
Period: January 1, 2004 – December 31	2004			
*Third Report suffices for 2005 Annual Filing If	candidate also file	ed Report Nos.	l and 2	
	<i>:</i> -			Cumulative
CONTRIBUTIONS SUMMARY	•			From Beginning of Report Period
			This Period	#1 through End of This
the state of the s	tray, h ar		_	Reporting Period
Total Monetary Contributions Received in Exce	ess of \$100	: -	-0-	3,143,88
2. Total Monetary Contributions Received of \$100	or Less		0-	3,143.88
	This Period	Cumulative From		·
	1, 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (Beginning of Report Period #1		
		Through End of This Reporting		
3. Total Amount of Monetary Contributions		Perioa		
Received (Add Lines 1 and 2)	•		-0-	3 143.88
Total Value of In Kind Contributions Received in Excess of \$100	n 2 235	-0-		
Excess of \$100				
under der Steiner der Steine der	er e		Y	
	XPENSES SUN	MARY	di Sur	
Total Monetary Expenses Paid in Excess of \$1	100		765	-0-
 Total Monetary Expenses Paid of \$100 or Less Total Amount of All Monetary Expenses Pai 	; 		360	
(Add Lines 5 and 6)	200	-106-1		
Total Value of In Kind Expenses in Excess of \$100	21.0000	MASS		
	2 23/5	-0-	•	
	-1			
	A CCIDANA C	ON		
• •				
I Declare Under Penalty of Perjury That the Forego	oing is True and Co	orrect.		
			11/2	121-
James Call			E) (50	104
Signature	i: Jan-04	P	Date AGEOF_	5

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named a first of the same of the same	Continue to Photography and	35 15 are

DAVIEL D CARLE	WASHOE COUTY SITEOU DISTILLY.	X
Name (print)	Office (if applicable)	District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
100.	7/29/04	FONDRAISING PARTY	1,150	
PEN'S 3495 LAKESIDE DR RENU NV. 59709	Lı	BIR	30	
NECSON LENES PUROX 12338 RENO W. 89 170	ų	LOINE	585	_
NAPA SONOMA 294 E. MUANA RENC, NV 69502	٧	FOOD	500	_
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Re	port	Peri	od-	#

1340.00	Δ	CAPLE
Name (print)		

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN

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1

DAVIEL D. CARNE Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	А
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	К

PAGE_ 4- OF T

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

23~	Ëζ	7	٠-
Name (print)			

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100
Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
TRI-SELTA WOSTER FEOTFALL 1331 C. RUMB CADE RENO, NV. 57702	D	6/22/01	200
PEAU SPANCE CHAMPEN OF COMMERCE I E IST ST. PENO NU 87 TO/	D	7/16/01	415
WASHEE COUNTY READOWN PARICUMY 4655 MEADOWN PARICUMY REAL NU 89511		4/23/04-	<i>150</i>

5 5

DANIEL D. CARNE

Washe GONTY BOARD OF TRUSTEES Office (if applicable)

Name (print)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH	AMOUNT OF EACH	CHECK HERE
EL CAMPINIOLE CONTRACTOR AND	CONTRIBUTION	Contribution	IF LOAN
Names A. Bradt 12010 CARNET PARK CANE AUSTIN, TX.	10/05/04	250.00	
G. DAVID ROBERTSON SO D. LIBERTY RENO, NU.	10/05/04	500.00	
RENO-SPORKS CHAMBER PO BOX 3499 RENO, NU.	10/05/04	250.00	
SANDRA RAFFEALLI 124 GREENFIDSE DR. RENO, NV.	8/30/04	750.00	
STEVEN ATCHESON 1697 ASPEN ARBEK RD. RENO, NV.	8/30/04	500.00	
UIRGINIA JACKSON 1370 MOUNTAINSATE DR. RENO, NU.	8/30/04	300.00	
LARRY SIMONS 1530 PASS DR. RENO, NV.	8/30/04	250.00	
BARKER COLEMAN CONSTR. 4741 CAUGHUN PARKWAY. RENO, NU.	8/30/04	200.00	
RENO TOYOTA 2100 KIETZKE RENO, MU.	8/30/04	500.00	
STEVEN KATZMAN 3295 TRUMPETER CT. RENO, NV.	8/30/04	200.00	
BARRELL ARMITH 4555 SADDLEHORN DR. RENO, NV.	8/30/04	150.00	
MOODY WEISKE PO BOX 3296 RENO, NU.	8/30/04	250.00	
SPECIALTY HEACTH CUNIC 350 W. 64 RCNO, NU.	8/30/04	500.00	
SIERRA SCHOLS GREDIT UNI PO BOX 7255 RENIO NU.	~8/30/04	200.00	
RENO WOODWORKING 1497 E. 7th RENO, NU.	8/30/04	200.00	
NEIL MEDING 1150 W. 1 SI RENO, NU,	8/30/04	200.00	
		52.00.00	

5200.00

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Daviel D. Carve Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
BILL CLOON 4070 FALLING WATER RENO, NU.	8/30/04	250.00	3. — <u>5.648</u>
DAD ROOFING 1000 SLENDALE SPARLS, NV	6/30/04	250.00	The sales of the s
BARBANA WUCANOWCH 3555 TANNARISK REND, NV	8/2/04	200.00	
50- CAL (NU CARRENTER) 501 N. LAMB BLUD, LAS VEGAS, NU.	8/30/04	200.00	
PETONOLLA ASSIC. 500 COSSIN WAY RENI, NV.	8/30/04	250.00	

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PANIEL D. CARNE Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF		1.42.00	10
PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
JB MARKETING 888 W 200 #311 RENG NV. 89503	F	8/30/04	4000.00
JUY 2225 E.GRES ST. SPARKS, NU.	Ð	10/18/04	5500.50
US POST OFFICE 750 44 ST. SPARKS, NV.	D	10/05/04	110.00
SK. SPECTRUM	D	10/19/04	170.00
			11,780,50

me (pnr	nt)	D. CARA	(Office (if applicable)	NV. B	7502	District (if applicable)
Aail Add	CENOC	city and zip code)	a AOC	COM		Telephone No.	
	e e e e e e e e e e e e e e e e e e e		دونون پائٹس ا	The state of the s			and the second second
		(es) CANDIDATE	and the second s	□BAG □POLPF	TY LIND EXP	AMENDED [ANNUAL FILING
	Period: Janu	Filing - Due J ary 1, 2003 – Decen	lanuary 1 nber 31, 2003	5, 2004	• .		
umben: others	ts in an Office water in an Offi	I — Due Augus with a 4-year term with a 6-year term s (BAGs) only:	st 31, 200 Period: Period: Period: Period:	4 Jan. 5, 2001 — Aug 26 Dec. 20, 1998 — Aug 2 Jan. 1, 2004 – Aug. 26, Dec. 5, 2002 – Aug 26	6, 2004 2004		PP:01 HH \$0.87
	Report #2	2 Due — Octob	per 26, 200 Period:)4 Aug. 27, 2004 — Oct. 2	21. 2004	FOR	OFFICE USE ONLY
Gs onl	-	B Due — Janua	ery 15, 200 Period: Period:	•	31, 2004		
hird l	Period: Ja	iling – Due Jar nuary 1, 2004 – ces for 2005 An	December	2005 31, 2004 i f candida te also	filed Report Nos	. 1 and 2	
	CON	TRIBUTIONS	SUMMA	RY		This Period	Cumulative From Beginning of Report Period #1 through End of This
	Total Monet	ary Contributions F	Received in E	Excess of \$100	ì	14,241.9	2 Reporting Period 2 45,735.80
2.	Total Monet	ary Contributions F	Received of S	100 or Less		1600,0	00
				This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting		
3.	Total Amou	int of Monetary C	ontributions	7841.92	Period	15,841.91	
4.	(Add Lines 1 Total Value Excess of \$	of In Kind Contribu	itions Receiv	red in	2,235	-7841.91 -	21, 125.88
	Park.		ा २ १५ (१४)	EXPENSES SI	JMMARY		
5.	Total Monet	ary Expenses Paid	d in Excess o	of \$100		19,575.	0 32, 470.50
	Total Amou	ary Expenses Paid nt of All Monetary				19.709.8	2 33 017 77
8.	(Add Lines 5 Total Value of of \$100	and 6) of In Kind Expense	s in Excess	0-	2,235		1
			. 14 KU	AFFIRMA	TION		
)eclar	e Under Pen			egoing is True and (Correct.		

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3

DANIEL D. CARNE Name (print) WASTPE WWYY SUPPORT
DISTRICT TRUSTEE
Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE
DP ADVISORS LLC PO BOX 7098 RENU NV. 89510	11/29	500,00	
SS ENTERPRISES PO BOX 11914 RONO, NV. 89510	11/29	150,00	
LIFESTYLE HOMES TND POBOX 7548 RENO, NV. 89510	11/29	5000.00	
KATTRIEN FRAUCK PO BOX 51840 SPARKS, NV. 89435	11/29	150.00	
STANLEY K KINDER 3565 LONE TREE LANE RENU, NV. 89511	11/29	200.00	
JB MARKETING 600 S. ROCK BLUD, SPANKS, NV 89431	12/17	241.92	
		4,241.92	
DANIEL D. CARNE		8,000,00	/
	-	14,241.92	124
	en Palling and a second a second and a second a second and a second a second and a second and a second and a		

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DANIEL D. CAPILE

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	
SIERRA SCHOOLS CREDIT	J.	12/17	#8,000.00	LOAN REPAINENT
UB MARKETING 888 W. 200 # 311 RENO, NV. 89503	DF	10/22	11, 375.50	
WHITNEY CARNE 3770 SCEEPY HOLLOW DR. RENO, NV. 89502	B	12/18	200.00	
			19,575.50	-

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WASHUE COUNTY SCHOOL DISTILLET TRUSTEC Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	-
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	К

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^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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DISTRUCT TRUSTEE
Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
		/		
				• • • • • • • • • • • • • • • • • • • •

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District (if applicable)

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IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
		,	

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Prescribed by Secretary of State
NRS 294A.120, 294A.125,
294A.140, 294A.150, 294A.160
294A.200, 294A.210, 294A.220, 294A.362
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